

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Midland, Texas

February 27, 1961

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Lone Star Producing Company Federal N. M. "B", Well No. "B" 3, in N.E. 1/4, S.W. 1/4,

(Company or Operator)

(Lease)

Sec. 28, T. 8-S, R. 36-E, NMPM, South Prairie Penn Pool

Unit Letter

Reservoir

County. Date Spudded. **Jan. 12, 1961** Date Drilling Completed **Feb. 18, 1961**

Please indicate location:

Elevation **4,121 B.F.** Total Depth **9,750'** PBDT **9,750'**

Top Oil/Gas Pay **9,687'** Name of Prod. Form. **Booth "C"**

PRODUCING INTERVAL -

Perforations **9,690 feet to 9,694 feet**

Open Hole _____ Depth **9,750'** Depth **9,687'**
Casing Shoe _____ Tubing _____

OIL WELL TEST -

Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Choke Size _____

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): **283.20** bbls. oil, **62.36** bbls water in **24** hrs, _____ min. Choke Size **1 1/2"**

GAS WELL TEST -

Natural Prod. Test: _____ MCF/Day; Hours flowed _____ Choke Size _____

Tubing, Casing and Cementing Record

Size	Feet	Sax
13-3/8"	617'	100
8-5/8"	4,333'	1781
5 1/2"	9,750'	700
2-3/8"	9,687'	

Method of Testing (pitot, back pressure, etc.): _____

Test After Acid or Fracture Treatment: _____ MCF/Day; Hours flowed _____

Choke Size _____ Method of Testing: _____

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): **500 gallons mud acid**

Casing _____ Tubing _____ Date first new _____
Press. **Posher** Press. **800'** oil run to tanks **February 24, 1961**

Oil Transporter **The Permian Corporation**

Gas Transporter **None**

Remarks:

[Handwritten signature]

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved _____, 19____

Lone Star Producing Company

(Company or Operator)

OIL CONSERVATION COMMISSION

By: *[Signature]*

(Signature)

By: *[Signature]*

Title **Sr. Foreman (Production)**

Send Communications regarding well to:

Title _____

Name **Lone Star Producing Company**

Address **P. O. Box 4815, Midland, Texas**